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# **COVER LETTER**

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eilió i	ECT. Lewis	Ranch LLC		** **
SUBJ	ECT.	<del></del>	d Liability Compa	any)
The er	nclosed Articles of	Organization and fee(s) are s	ubmitted for filing	<u>z</u> .
Please	return all correspo	ndence concerning this matte	er to the following	;
	Jennette	Lewis		
			Name of Person)	
	Life for the first	(	Firm/Company)	
	127 North	neast First Stree	et	
			(Address)	
	Fort Mea	de, Florida 3384	41	
		(City	/State and Zip Code	:)
For fu	rther information c	oncerning this matter, please	call:	
Jen	nette Lew	is	at ( 863	, 285-9876
	(Name o	f Person)		e & Daytime Telephone Number)
Enclo	sed is a check for	the following amount:		
□\$125	.00 Filing Fee [	✓\$130.00 Filing Fee & Certificate of Status	\$155.00 Filin Certified Cop (additional copy	py Certificate of Status &
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registration Division Clifton B 2661 Exe	ourier Address on Section of Corporations uilding cutive Center Circle see, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

A	RT	ICI	Æ	I.	Nan	16.

The name of the Limited Liability Company is:

## Lewis Ranch LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

#### **ARTICLE II - Address:**

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	Mailing Address:	
127 Northeast First Street	127 Northeast First Street	
Fort Meade, Florida 33841	Fort Meade, Florida 33841	

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Jennette Lewis Name

## 127 Northeast First Street

Florida street address (P.O. Box NOT acceptable)

Fort Meade, Florida<sub>L</sub>33841
City, State, and Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.,

Registered Agent's Signature (REQUIRED)

(CONTINUED) Page 1 of 2

#### ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

IGRM	Jennette Lewis  127 Northeast First Street  Fort Meade, Florida 33841
MGRM	Richard Cason
	115 Pine Avenue
	Fort Meade, Florida 33841
Use attachment if necessary)	
E.W. Effective data if athorithms	the date of filing: (OPTION

### **REQUIRED SIGNATURE:**

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

# Jennette Lewis

Typed or printed name of signee

#### Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)